



SCRUTINY BOARD (HEALTH AND WELL-BEING AND ADULT SOCIAL CARE)

**Meeting to be held in Civic Hall, Leeds on
Thursday, 9th August, 2012 at 2.30 pm**

MEMBERSHIP

Councillors

P Truswell - Middleton Park;
G Hussain - Roundhay;
T Murray - Garforth and Swillington;
J Walker - Headingley;
C Fox - Adel and Wharfedale;
S Armitage - Cross Gates and Whinmoor;
K Bruce - Rothwell;
J Illingworth (Chair) - Kirkstall;
S Varley - Morley South;
S Bentley - Weetwood;
M Robinson - Harewood;

Co-optees

Emma Stewart Alliance of Service Users
Sally Morgan Equality Issues
Betty Smithson Leeds LINK
Joy Fisher Leeds LINK

Please note: Certain or all items on this agenda may be recorded

**Agenda compiled by:
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Civic Hall
LEEDS LS1 1UR
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**Principal Scrutiny Adviser:
Steven Courtney
Tel: 24 74553**

CONFIDENTIAL AND EXEMPT ITEMS

The reason for confidentiality or exemption is stated on the agenda and on each of the reports in terms of Access to Information Procedure Rules 9.2 or 10.4(1) to (7). The number or numbers stated in the agenda and reports correspond to the reasons for exemption / confidentiality below:

9.0 Confidential information – requirement to exclude public access

9.1 The public must be excluded from meetings whenever it is likely in view of the nature of the business to be transacted or the nature of the proceedings that confidential information would be disclosed. Likewise, public access to reports, background papers, and minutes will also be excluded.

9.2 Confidential information means

- (a) information given to the Council by a Government Department on terms which forbid its public disclosure or
- (b) information the disclosure of which to the public is prohibited by or under another Act or by Court Order. Generally personal information which identifies an individual, must not be disclosed under the data protection and human rights rules.

10.0 Exempt information – discretion to exclude public access

10.1 The public may be excluded from meetings whenever it is likely in view of the nature of the business to be transacted or the nature of the proceedings that exempt information would be disclosed provided:

- (a) the meeting resolves so to exclude the public, and that resolution identifies the proceedings or part of the proceedings to which it applies, and
- (b) that resolution states by reference to the descriptions in Schedule 12A to the Local Government Act 1972 (paragraph 10.4 below) the description of the exempt information giving rise to the exclusion of the public.
- (c) that resolution states, by reference to reasons given in a relevant report or otherwise, in all the circumstances of the case, the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

10.2 In these circumstances, public access to reports, background papers and minutes will also be excluded.

10.3 Where the meeting will determine any person's civil rights or obligations, or adversely affect their possessions, Article 6 of the Human Rights Act 1998 establishes a presumption that the meeting will be held in public unless a private hearing is necessary for one of the reasons specified in Article 6.

10.4 Exempt information means information falling within the following categories (subject to any condition):

- 1 Information relating to any individual
- 2 Information which is likely to reveal the identity of an individual.
- 3 Information relating to the financial or business affairs of any particular person (including the authority holding that information).
- 4 Information relating to any consultations or negotiations, or contemplated consultations or negotiations, in connection with any labour relations matter arising between the authority or a Minister of the Crown and employees of, or officer-holders under the authority.
- 5 Information in respect of which a claim to legal professional privilege could be maintained in legal proceedings.
- 6 Information which reveals that the authority proposes –
 - (a) to give under any enactment a notice under or by virtue of which requirements are imposed on a person; or
 - (b) to make an order or direction under any enactment
- 7 Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime

Item No	Ward/Equal Opportunities	Item Not Open		Page No
1			<p>APPEALS AGAINST REFUSAL OF INSPECTION OF DOCUMENTS</p> <p>To consider any appeals in accordance with Procedure Rule 25* of the Access to Information Procedure Rules (in the event of an Appeal the press and public will be excluded).</p> <p>(* In accordance with Procedure Rule 25, notice of an appeal must be received in writing by the Head of Governance Services at least 24 hours before the meeting).</p>	
2			<p>EXEMPT INFORMATION - POSSIBLE EXCLUSION OF THE PRESS AND THE PUBLIC</p> <p>1 To highlight reports or appendices which officers have identified as containing exempt information, and where officers consider that the public interest in maintaining the exemption outweighs the public interest in disclosing the information, for the reasons outlined in the report.</p> <p>2 To consider whether or not to accept the officers recommendation in respect of the above information.</p> <p>3 If so, to formally pass the following resolution:-</p> <p>RESOLVED – That the press and public be excluded from the meeting during consideration of the following parts of the agenda designated as containing exempt information on the grounds that it is likely, in view of the nature of the business to be transacted or the nature of the proceedings, that if members of the press and public were present there would be disclosure to them of exempt information.</p>	

3

LATE ITEMS

To identify items which have been admitted to the agenda by the Chair for consideration.

(The special circumstances shall be specified in the minutes.)

4

DECLARATION OF DISCLOSABLE PECUNIARY AND OTHER INTERESTS

To disclose or draw attention to any disclosable pecuniary interests for the purposes of Section 31 of the Localism Act 2011 and paragraphs 13-18 of the Members' Code of Conduct. Also to declare any other significant interests which the Member wishes to declare in the public interest, in accordance with paragraphs 19-20 of the Members' Code of Conduct

5

APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTES

To receive any apologies for absence and notification of substitutes.

6

CALL IN DECISION - BRIEFING PAPER

To consider a report of the Head of Scrutiny and Member Development advising the Scrutiny Board on the procedural aspects of Calling In the decision

(report attached)

1 - 6

7

10.4(3)

**CALL IN - SHARED SERVICE PARTNERSHIP
WITH CALDERDALE METROPOLITAN
BOROUGH COUNCIL TO MEET ADULT SOCIAL
CARE TECHNOLOGY REQUIREMENTS**

7 - 50

To consider the report of the Head of Scrutiny and Member Development presenting the background papers to the decision which has been Call In in accordance with the Council's Constitution regarding a proposed '*Shared service partnership with Calderdale Metropolitan Borough Council to meet Adult Social Care technology requirements*'

(report attached)

8

OUTCOME OF CALL IN

In accordance with the Executive and Decision Making Procedure Rules, to consider the Board's formal conclusions and recommendation(s) arising from the consideration of the called-in decision

9

DATE AND TIME OF NEXT MEETING

Wednesday 26th September 2012 at 10.00am (Pre-meeting for all Board Members at 9.30am)

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Report of the Head of Scrutiny and Member Development

Report to Scrutiny Board (Health and wellbeing and Adult Social Care)

Date: 9 August 2012

Subject: Call In Briefing Paper

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Summary of main issues

1. In accordance with the Council's Constitution, an Executive Board decision has been Called In. The background papers to this particular decision are set out as a separate agenda item and appropriate witnesses have been invited to give supporting evidence.
2. This report advises the Scrutiny Board on the procedural aspects of Calling In the decision.
3. The Board is advised that the Call In is specific to the report considered by the Executive Board and issues outside of this decision, including other related decisions, may not be considered as part of the Board's decision regarding the outcome of the Call In.

Recommendations

4. The Scrutiny Board is asked to note the contents of this report and to adopt the procedure as detailed within it.

1 Purpose of this report

- 1.1 In accordance with the Council's Constitution, an Executive Board decision has been Called In. The background papers to this particular decision are set out as a separate agenda item and appropriate witnesses have been invited to give supporting evidence.
- 1.2 This report advises the Scrutiny Board on the procedural aspects of Calling In the decision.

2 Background information

- 2.1 The Call In process provides the facility for the Scrutiny Board to require a decision taker to reconsider a decision within a specified time period. This is a separate function from the Scrutiny Board's ability to review decisions already taken and implemented.
- 2.2 The eligibility of an Executive Board decision for Call In is indicated in the minutes; the eligibility of an officer decision for Call In is indicated by the Director on the Delegated Decision Form.

3 Main issues

- 3.1 The Board is advised that the Call In is specific the report considered by the Executive Board and issues outside of this decision, including other related decisions, may not be considered as part of the Board's decision regarding the outcome of the Call In.

Reviewing the decision

- 3.2 The process of reviewing the decision is as follows:
 - Members who have requested the Call In invited to explain their concern/reason for Call In request.
 - Relevant Executive Board Member (supported by appropriate officers) asked to explain decision.
 - Further questioning from the Board as appropriate.
- 3.3 Members are reminded that it is only the decision Called In that the Board can make any recommendation on.

Options available to the Board

- 3.4 Having reviewed the decision, the Scrutiny Board will need to agree what action it wishes to take. In doing so, it may pursue one of three courses of action as set out below:

Option 1- Release the decision for implementation

- 3.5 Having reviewed this decision, the Scrutiny Board may decide to release it for implementation. If the Scrutiny Board chooses this option, the decision will be immediately released for implementation and the decision may not be Called In again.

Option 2 - Recommend that the decision be reconsidered.

- 3.6 The Scrutiny Board may decide to recommend to the decision maker that the decision be reconsidered. If the Scrutiny Board chooses this option a report will be submitted to the decision maker.
- 3.7 In the case of an Executive Board decision, the report of the Scrutiny Board will be prepared within three working days of the Scrutiny Board meeting and submitted to the Executive Board. Any report of the Scrutiny Board will be referred to the next Executive Board meeting for consideration.
- 3.8 In reconsidering the decision and associated Scrutiny Board report, the Executive Board may vary the decision or confirm its original decision. In either case, this will form the basis of the final decision and will not be subject to any further call-in.

Option 3 - Recommend that the decision be reconsidered and refer the matter to full Council if recommendation not accepted.

- 3.11 This course of action would only apply if the Scrutiny Board determined that a decision **fell outside the Council's Budget and Policy Framework** and this determination were confirmed by the Council's Section 151 Officer (in relation to the budget) or Monitoring Officer (in relation to other policies).
- 3.12 If, at the conclusion of this meeting, the Scrutiny Board forms an initial determination that the decision in question should be challenged on the basis of contravening the Budget and Policy Framework, then confirmation will subsequently be sought from the appropriate statutory officer.
- 3.13 Should the statutory officer support the Scrutiny Board's determination, then the report of the Scrutiny Board will be presented in the same manner as for Option 2. If the decision maker accepts the recommendation of the Scrutiny Board in these circumstances, then the revised decision will be published in the same manner as for Option 2 and the decision may not be Called In again. If, however, the decision maker does not accept the recommendation of the Scrutiny Board, then the matter will be referred to full Council for final decision. Decisions of full Council may not be Called In.
- 3.14 In the event of the appropriate statutory officer concluding that the decision would not be a departure from the Budget and Policy Framework, then this will be the subject of a report to the Scrutiny Board, with a copy of the report presented to Executive Board. This would normally be progressed as for Option 2 (i.e. presented as a recommendation to the decision taker) but with no recourse to full Council in the event that the decision is not varied. As with Option 2, no further Call In of the decision would be possible.
- 3.15 However, the Scrutiny Board may resolve that, if the statutory officer does not confirm contravention of the Budget and Policy Framework, then it should be released for implementation in accordance with Option 1.

Failure to agree one of the above options

- 3.16 If the Scrutiny Board, for any reason, does not agree one of the above courses of action at this meeting, then Option 1 will be adopted by default, i.e. the decision will be released for implementation with no further recourse to Call In.

Formulating the Board's report

- 3.17 If the Scrutiny Board decides to release the decision for implementation (i.e. Option 1), then the Scrutiny Support Unit will process the necessary notifications and no further action is required by the Board.
- 3.18 If the Scrutiny Board wishes to recommend that the decision be reconsidered (i.e. Options 2 or 3), then it will be necessary for the Scrutiny Board to agree a report setting out its recommendation together with any supporting commentary.
- 3.19 Due to the tight timescales within which a decision Call In must operate, it is important that the Scrutiny Board's report be agreed at the meeting.
- 3.20 If the Scrutiny Board decides to pursue either of Options 2 or 3, it is proposed that there be a short adjournment during which the Chair, in conjunction with the Scrutiny Support Unit, should prepare a brief statement proposing the Scrutiny Board's draft recommendations and supporting commentary. Upon reconvening, the Scrutiny Board will be invited to amend/ agree this statement as appropriate (a separate item has been included in the agenda for this purpose).
- 3.21 This statement will then form the basis of the Scrutiny Board's report (together with factual information as to details of the Called In decision, lists of evidence/witnesses considered, Members involved in the Call In process etc).
- 3.22 The Scrutiny Board is advised that there is no provision within the Call In procedure for the submission of a Minority Report.

4 Corporate Considerations

4.1 Consultation and Engagement

- 4.1.1 Prior to submitting a Call In, a nominated signatory must first contact the relevant officer or Executive Member to discuss their concerns and their reasons for wanting to call in the decision. Part of this discussion must include the Member ascertaining the financial implications of requesting a Call In. The details of this discussion should be referenced within the Call In Request Form.
- 4.1.2 The background papers to this particular decision will make reference to any internal or external consultation processes that have been undertaken in relation to the decision.

4.2 Equality and Diversity / Cohesion and Integration

- 4.2.1 The background papers to this particular decision will make reference to any impact on equality areas, as defined in the Council's Equality and Diversity Scheme.

4.3 Council Policies and City Priorities

4.3.1 The background papers to this particular decision will make reference to any Council Policies and City Priorities relevant to the decision.

4.4 Resources and Value for Money

4.4.1 The background papers to this particular decision will make reference to any significant resource and financial implications linked to the decision.

4.5 Legal Implications, Access to Information and Call In

4.5.1 This report does not contain any exempt or confidential information.

4.5.2 The background papers to this particular decision will make reference to any legal implications linked to the decision.

4.6 Risk Management

4.6.1 The background papers to this particular decision will make reference to any risk management issues linked to the decision.

5 Conclusions

5.1 In accordance with the Council's Constitution, an Executive Board decision has been Called In. This report advises the Scrutiny Board on the procedural aspects of Calling In the decision.

5.2 In particular, the Board is advised that the Call In is specific to the report considered by Executive Board at its meeting on 18 July 2012 and issues outside of this decision, including other related decisions, may not be considered as part of the Board's decision regarding the outcome of the Call In.

6 Recommendations

6.1 The Scrutiny Board is asked to note the contents of this report and to adopt the procedure as detailed within it.

7 Background documents¹

7.1 Council Constitution – Executive and Decision-making Procedure Rules

¹ The background documents listed in this section are available for inspection on request for a period of four years following the date of the relevant meeting. Accordingly this list does not include documents containing exempt or confidential information, or any published works. Requests to inspect any background documents should be submitted to the report author.

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Report of the Head of Scrutiny and Member Development

Report to Scrutiny Board (Health and Wellbeing and Adult Social Care)

Date: 9 August 2012

Subject: Shared service partnership with Calderdale Metropolitan Borough Council to meet Adult Social Care technology requirements

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: 10.4.3	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Appendix 1 to the attached Executive Board report is deemed confidential/exempt under Access to Information Procedure Rule 10.4.3, as it contains information which if disclosed to the public would, or would be likely to prejudice the commercial interests of the Council and/or the proposed partner.</i>		

Summary of main issues

1. This paper presents the background papers to a decision which has been Called In in accordance with the Council's Constitution
2. Papers are attached as follows:
 - Copy of the completed Call In request form
 - Report of the Director (Adult Social Services) presented to Executive Board at its meeting on 18 July 2012
 - Extract from the draft minutes of the Executive Board meeting held on 18 July 2012
3. Appropriate Members and officers have been invited to attend the meeting in order to explain the decision and respond to questions.

Recommendations

4. The Scrutiny Board (Health and Wellbeing and Adult Social Care) is asked to review this decision and to determine what further action it wishes to take.

Background documents¹

5. None used

¹ The background documents listed in this section are available for inspection on request for a period of four years following the date of the relevant meeting. Accordingly this list does not include documents containing exempt or confidential information, or any published works. Requests to inspect any background documents should be submitted to the report author.

CALL IN REQUEST – Option (a)

A Call In request may be made by:

Any five non-executive Members of council

Date of decision publication: 20/07/2012

Delegated decision ref:or

Executive Board Minute no: 45

Decision description: Shared Services Partnership with Calderdale Metropolitan Borough Council to meet Adult Social Care Technology Requirements → Replacement of the ESCK system by Adult Social Care

Discussion with Decision Maker:
Prior to submitting a Call In, a nominated signatory must first contact the relevant officer or Executive Member to discuss their concerns and their reasons for wanting to call in the decision. Part of this discussion must include the Member ascertaining the financial implications of requesting a Call In.

Please identify contact and provide detail.

Director/author of delegated decision report.

Executive Board Member

Detail of discussion (to include financial implications)
A discussion of the financial implications was held with the Executive Board report author Steve Home on 27/07/2012. During this discussion Cllr Alan Lamb raised the issue of financial implications.

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Reasons for Call In:

All requests for Call In must detail why, in the opinion of the signatories, the decision was not taken in accordance with the principles set out in Article 13 of the Council constitution (decision making) (principles of decision making) or where relevant issues do not appear to be taken into consideration. *Please tick the relevant box(es) and give an explanation.*

- | | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | Proportionality (ie the action must be proportionate to the desired outcome) |
| <input type="checkbox"/> | Due consultation and the taking of professional advice from officers |
| <input type="checkbox"/> | Respect for human rights |
| <input checked="" type="checkbox"/> | A presumption in favour of openness |
| <input checked="" type="checkbox"/> | Clarity of aims and desired outcomes |
| <input checked="" type="checkbox"/> | An explanation of the options considered and details of the reasons for the decision |
| <input type="checkbox"/> | Positive promotion of equal opportunities |
| <input type="checkbox"/> | Natural justice |

Explanation The report makes no clear mention of the history of this scheme in particular the estimated costs set out in June 2010 which were almost £10m less than total costs for this scheme overall. There is also a lack of clarity as to why costs have inflated to such an extent.

There is a lack of clarity around the reasons for abandoning the joint procurement approach, especially given increase in project costs.

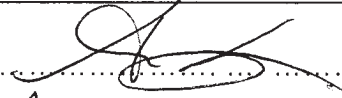
The outcomes that have now been delivered in this report do not seem proportional to the desired outcome of delivering a replacement system for the ESCR system. A like for like replacement that addressed the concerns raised in inspection reports would not have been as expensive as the option approved in this report.

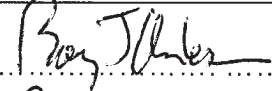
Was the possibility of pursuing joint procurement and then adjusting to meet the different needs of the two departments considered?

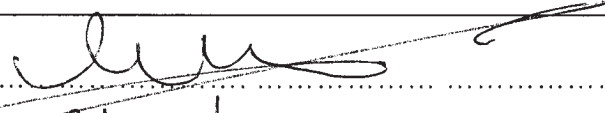
What were the aims of this project when initially developed in 2010 and why have the costs inflated to such an extent and have details of the reasons for this been explained to elected members.

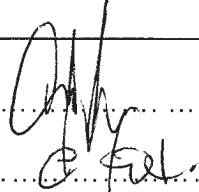
Leeds City Council Scrutiny Support Unit

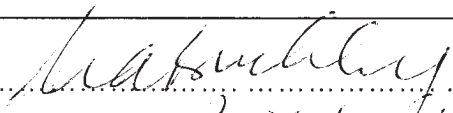
The following signatories request that the above decision be called in:

1) Signature.....	
Print name.....	ALAN LAMB

2) Signature.....	
Print name.....	Brian Anderson

3) Signature.....	
Print name.....	Red Wood

4) Signature.....	
Print name.....	P. Full

5) Signature.....	
Print name.....	NEIL BUCKLEY

This form should be submitted to the Head of Scrutiny and Member Development (Scrutiny Support Unit, 1st Floor West, Civic Hall) by **5.00pm on the fifth working day after the decision publication date**. The office is open from 9.00am to 5.00pm.

(For further information on the Call In procedure please refer to the Scrutiny Support Unit intranet site, or contact the Unit on 39 51151).

Leeds City Council Scrutiny Support Unit

For office use only: (box A)

Received on behalf of the Head of Scrutiny and Member Development by:

S. Lewis (signature)

Date: *27 July 2012* Time: *14:15M* SSU ref: *2012-13-44-59*

For office use only: (box B)

Exemption status checked:

Date checked:

Signatures checked:

Receipts given:

Validity re article 13

Call In authorised: Yes/No

Signed:

Date: *27.7.12*

Receipt details: */*

Report of : The Director of Adult Social Services

Report to : Executive Board

Date: 18th July 2012

Subject: Shared service partnership with Calderdale Metropolitan Borough Council to meet Adult Social Care technology requirements

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: 10.4(3)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Summary of main issues

1. Adult Social Care and the Health Service are currently undergoing unprecedented change at both a local and national level. Most notably, the Health and Social Care Act (2012) places emphasis on more integrated models of provision of health and social care for the benefit of people in need. The prevailing financial climate and its impact upon public sector resources also raises challenges around how we can work better in partnership to deliver better outcomes for people with significantly less resources. A further review, is also taking place, of Adult Social Care legal responsibilities and funding indicated by the soon to be published Social Care Bill.
2. In terms of the technology requirements to support the future Health & Social Care model in Leeds, the extent of these changes and challenges were recognised at the Executive Board in January 2011, where it was agreed that the replacement of the Adult Social Care case management system would be deferred until national requirements and local responses to those requirements were clearer.
3. Although there is much greater clarity, particularly in relation to the expectation of much more integrated services at a local level, there still remains some uncertainty. Nevertheless, Leeds existing ESCR system is now approaching end of life and will not support new ways of working in the near future. Therefore a solution is required which enables Adult Social Care to move to a new system in a timely manner but also offers the potential flexibility to adapt to the integrated Health and Social Care agenda.
4. This report outlines the known and expected future requirements for a replacement case management system and examines the options available to meet those requirements. The key issues to be addressed are the provision of:

- an intuitive system that meets the current and known future requirements of front line staff.
 - a system that offers both a stable and agile configuration that can be amended quickly and easily to respond to the changing requirements of existing and future integrated service needs
 - a system that can be implemented in a more timely manner and does not lock the Council in to a long term contract for modules that may not be required in the medium term.
5. The report outlines the range of options considered to meet the above requirements and recommends the implementation of a successful system developed by another local authority, Calderdale Metropolitan Borough Council, as the preferred option that best meets the above requirements.
6. The report further suggests that this option is implemented as a 'shared services partnership arrangement' to enable both authorities to gain mutual ongoing benefit from the arrangement.

Recommendations

7. The report seeks approval to:
- Enter into a partnership agreement with Calderdale Metropolitan Borough Council for the purchase of an initial 20% share in their Adult Social Care Client Information System (CIS) with options to increase this share as described in section 3.2 of this report
 - Authorise expenditure, as defined in exempt Appendix 1 to:
 - § purchase a share in the system and implementation support from Calderdale Metropolitan Borough Council
 - § implement the Case management, integrated financial and contract management modules of Calderdale's CIS in partnership with Calderdale Metropolitan Borough Council to meet Leeds requirements.
 - § implement and integrate Leeds City Council's corporate Electronic Document and Records Management System (EDRMS) in parallel with the Case Management System
 - § build and develop a reporting and Business Intelligence (BI) solution utilising existing corporate reporting and Business Intelligence technology.

1 Purpose of this report

- 1.1 This report considers the options for replacing the current Adult ESCR and ESCR financial systems and outlines the case for adopting a shared service partnership arrangement with another local authority, Calderdale Metropolitan Borough Council, as the preferred option.
- 1.2 The report also outlines the supporting technology components, including Electronic Document Record Management and Reporting, to be implemented alongside the case management solution. The investment in and the implementation of this set of technology components will help Adult Social Care to meet its short and medium term requirements and priorities. It will also provide significant opportunities for future joint developments of the system itself, its integration with other systems including health systems and also potential commercialisation of the products.
- 1.3 The report seeks approval to enter into a partnership agreement with Calderdale Council and release funding and incur expenditure as detailed within section 6 of this report.

2 Background information

- 2.1 One of the key priorities for Leeds City Council is to provide excellent Adult Social Care services to protect vulnerable adults, enable people to maintain their independence and support them to play a full part in society. To do this, Adult Social Care must have efficient processes supported by effective information and case management systems.
- 2.2 Our systems and processes must be aligned to, and enhance, the way that practitioners work so they are empowered to support people to achieve the outcomes that are important to them and to allow service users to have clear control of their care. Practitioners need immediate access to accurate and up-to-date information if they are to keep people safe and deliver excellent services.
- 2.3 Demographic research has shown that Leeds, like other national and international cities, is faced with a number of key challenges. The number of people who access Adult Social Care services will continue to rise, and the economy is still recovering from the effects of global recession. In attempting to mitigate any negative impact on services, Leeds City Council has to make savings and realise efficiencies in the way services are provided. More effective ways of working and proficient processes supported by modern fit for purpose systems will be fundamental to meeting the challenges of reducing costs whilst meeting increased demand.
- 2.4 On 21 May 2012 the Department of Health published the Information Strategy for the next 10 years in a document entitled 'The Power of Information: Putting all of us in control of the health and care information we need'. This strategy was based on feedback from the national consultation on the document Liberating the NHS: An Information Revolution: a consultation on proposals (Department of Health, 2010).
- 2.5 The Power of Information sets aspirations for the use and management of information across health and social care. The document 'marks a shift in the way information must drive better health, care and support – to improve our experience, quality and outcomes of health and care services, putting people truly at the heart of care.' (Department of Health, 2012:p.2).
- 2.6 The future of Adult Social Care is therefore likely to look very differently to the present model of service delivery. Increased integration with health partners and the delivery of

the new 'Easy Social Care Model', recently endorsed by ADASS, will require significant business change. To ensure we remain at the forefront of these developments it is vital that Adult Social Care has systems and technology to not only support the way we work now, but to place us in the best possible position to make these changes and support future ways of working.

- 2.7 The technology roadmap for Leeds Adult Social Care has been developed in light of this major change that will revolutionise the way that information is used to support the future direction of Adult Social Care. The approach adopted by Leeds has been informed by the 'Easy Social Care Model'. Appendix 2 shows the Leeds version of the model with the first phase components as proposed in this paper highlighted.
- 2.8 The Government is committed to an approach that connects local systems and unleashes innovation at a local level rather than expecting every organisation to use the same technology.
- 2.9 We must have a system in place that leaves us in the best possible position to respond to these ambitions. With an increased focus on joint working with health and more extensive commissioning activity, it is essential that Leeds is mindful of the evolving landscape and in the best possible position to welcome and respond to the changes. This will require improved information systems and practices.
- 2.10 A considerable amount of time and effort has been put into the development of a roadmap of technology that will meet this future vision. The technology roadmap is aligned to the Leeds Adult Social Care priorities of achieving; better lives through enterprise, better lives through integration and better lives through housing care and support.
- 2.11 In January 2011 a paper was presented to Executive Board requesting approval for Children's Services to progress with the procurement and implementation of a replacement system. This procurement has now concluded and a supplier has been selected ready for the implementation to commence.
- 2.12 The paper, presented at January 2011 Executive Board, also sought agreement to defer any decision to procure a replacement system for Adult Social Care as it was not deemed prudent to pursue a traditional case management system when other solutions may be better placed for the evolving national landscape.
- 2.13 The remainder of the report details our requirements, options considered and the reasons for the preferred solution.

3 Main issues

3.1 Options Appraisal

- 3.1.1 A number of options for the replacement of the existing ESCR and ESCR financials systems have been investigated in light of the changing Health and Social Care landscape. Options have therefore been investigated in relation to:
- Upgrading the existing system
 - The use of health systems
 - The procurement of a third party system (similar to or the same as Children's Social Work Service.)
 - Potential 'shared service' arrangement with another local authority where we adopt their case management recording system

(exempt Appendix 1 provides more detail of the options appraisal).

- 3.1.2 To ensure that a rounded view of all the options has been undertaken the following key criteria have been used:
- Tactical Fit (meets the need to move to a new solution in a timely manner)
 - Strategic Fit (potential to support integrated ways of working with partners)
 - Business Fit (fit with ASC processes and delivery of its services)
 - Technical Fit (fit with internal technology infrastructure)
 - Risk Factors (associated risks)
 - Implementation Considerations (costs and timescales)
- 3.1.3 An upgrade to the existing ESCR and ESCR Financials systems was considered. However, this would be an expensive, time consuming and resources intensive process and whilst providing a stable, supported platform would not deliver the required improved functionality to meet Adult Social Care's needs.
- 3.1.4 A long term vision exists for integrated health and social care teams to utilise joint systems, but currently health systems do not have sufficiently mature capability to support social care processes. Health also use a number of different systems across health establishments including GP surgeries. Work is still ongoing with Health and their suppliers to develop future strategies for improved use and integration of health and social care systems.
- 3.1.5 Consideration has been given to transferring to a 3rd party system but whilst these systems could meet social care requirements, the market is very under developed in terms of these systems hosting both health and social care data/processes. A 3rd party option would also require a lengthy procurement process which would not meet the business need for a 'tactical' solution or provide the flexibility ASC needs to respond to a rapidly changing environment and new ways of working. In addition to this constraint it could potentially lock the council into an expensive, long term contract that, when providing joint services with health, may not be entirely required.
- 3.1.6 A shared service, with Calderdale Metropolitan Borough Council, is the preferred option to provide Adult Social Care with a 'tactical solution' as it meets both short and medium term requirements in a cost effective manner. Removing the need for a lengthy procurement process will enable Adult Social Care to migrate to a new solution in a more timely manner. This option also provides a high degree of flexibility with opportunities for its potential longer term use with partners or, if the direction changes, reduced use as the council would not be locked into a 3rd party contract.
- 3.1.7 The project to replace the current ESCR case management and ESCR Financials systems is not restricted to purely acquiring a new case management system. This project will deliver a number of supporting technology components, and integration between these components, to ensure that Adult Social Care are able to continue to deliver an efficient and effective Adult Social Care service.
- (Appendix 3 provides more details on the components).
- 3.1.8 The project will be responsible for managing all implementation activities to ensure that the new technology components and changes are fully embedded into Adult Social Care to ensure the associated benefits can be realised.

(Appendix 4 provides more details on the business benefits).

3.2 Recommended Option - Partnership Arrangements

- 3.2.1 Leeds City Council will enter into a formal partnership arrangement with Calderdale Council for the delivery and support of the Adult Social Care client system. The agreement will not be as prescriptive or of the same nature contractually as similar commercial agreements with the private sector. There will be a binding legal agreement which will afford both parties mutual benefit and adequate protection for the period with flexible exit options and opportunities to extend arrangements if agreed by both parties.
- 3.2.2 The partnership has many benefits as outlined in the next section and is based on a public sector shared reward, risk and effort model – a true ‘shared service’ arrangement. For a fee agreed at the outset, Leeds City Council will own a stake in the system and this will ‘buy’ the right to have an equal say in the development of the system going forward. Calderdale will undertake these developments using predominantly their own staff and the cost for major work would typically be shared. However, routine developments undertaken for legislative or enhancement reasons would not be directly chargeable and would be contained within the annual support and maintenance fee payable by Leeds to Calderdale. Note, there could be occasions when Leeds might undertake particular developments when it was judged by both parties to be appropriate and beneficial for Leeds to do so.
- 3.2.3 Calderdale have always been committed to an internal systems development strategy and they are less dependent on third party packages for their line of business systems. Leeds historically, mainly because of its size, has been more dependent on packaged solutions. This strategy has served Calderdale well and they have developed a reputation for agile development on a technical platform that they understand very well and therefore their ability to meet changes in legislation and generally keep pace with business driven requirements is well proven. This history and strategy gives Leeds City Council the confidence required to ‘buy into’ a system and approach that is highly likely to meet continual legislative and business demands for change in a service area which is still emerging and developing nationally.
- 3.2.4 The ‘partnership’ approach outlined above is valid within the council’s procurement rules with the significant benefit of retaining investment in the public sector and enhanced speed of acquiring the system i.e. without the need for a protracted tendering exercise. Due diligence around the functional and technical aspects of the system have been and continue to be undertaken to ensure the system is a good fit for Leeds in the short and medium term. The future vision of Adult Social Care and the Health Reform agenda are an opportunity for Leeds City Council and Calderdale to work together on developing the system longer term. Alternatively the flexibility of the arrangement provides Leeds City Council (and Calderdale) the option of choosing a different route if appropriate without the ‘lock in’ to a contract normally associated with public, private contracts.
- 3.2.5 It is recognised that implementing the solution in Leeds would represent a significant boost for the reputation of the system and in return for Leeds being a showcase, a further share in the system would be issued free of charge taking Leeds City Council towards a full 49% stake in the asset.
- 3.2.6 There is significant ‘buy in’ to making the proposed model a success from both parties and both Chief Executives and respective senior management teams are very supportive of this approach. Furthermore, Calderdale have recently entered the market for a private sector partner to help market and sell this and other Calderdale developed systems. There is initial market interest and therefore the opportunity for income to Calderdale and Leeds (for its share of up to 49%) to benefit local ‘social enterprise’ initiatives is possible.

3.2.7 The benefits of a Shared Service Partnership Model are outlined below:

- A true shared service approach demonstrated in West Yorkshire based on shared reward, risk and effort.
- Funding stays within the two parties and is not for profit and will drive shared product development and support.
- No protracted and resource intensive procurement
- Leeds City Council will have an equal say in the development of the solution going forwards in return for an initial purchased stake in the asset (system).
- Leeds initial stake in the asset would be refundable if the system is not successfully delivered to agreed time, quality and price.
- Most of the development and support work will be undertaken by Calderdale resources.
- Not locked into a long term contract. Minimum period 3 years with options to extend and with a 3 month exit arrangement beyond 3 years.
- Potential for income based on up to 49% share of the system if the system is sold to other parties. This arrangement is exclusive to Leeds City Council.
- Work with Calderdale on opportunities for integration with the health sector and on other mutually agreed developments.
- Underpinned by a legal agreement that will give both parties the necessary benefits, flexibility and protection.
- The partnership will help Calderdale sustain its development programme and continue to provide cost effective solutions to Adult Health and Social Care within Calderdale.
- Calderdale already provides its Social Care systems to one of the smallest Local Authorities in the UK, providing software to Leeds would enable Calderdale to demonstrate truly scalable solutions for Social Care. This has the potential to become a highly marketable commodity which would generate income for Calderdale (and Leeds).
- Calderdale will benefit from the Social Care expertise within Leeds which will help inform robust system enhancements and future design.

4 Corporate Considerations

4.1 Corporate Considerations – Customer Access

4.1.1 The component model, outlined within the Easy Social Care Model, supports the Adult Social Care direction of travel in relation to the 'Customer Access' strategy that is being developed in Adult Social Care. The model is very much focused on getting the 'customer contact' right at the first point and ensuring that we understand our customers needs for information and advice services.

- 4.1.2 The corporate WIRP (Web and Intranet Replacement Project) is one channel that supports us to deliver this 'customer journey' model and we intend to exploit the functionality for 'do it on line' options so we can offer a better user experience and expand the services that are accessible on line in the future.
- 4.1.3 Adult Social Care is also in partnership on a regional level for the E Market Place developments. The provider for this is Shop4Support and we are currently scoping our requirements to ensure we can maximise the information directories we already have. Our main directory is the Leeds Directory of services and analysis is currently underway to understand how the directory can be expanded/updated to meet the E market Place requirements.

4.2 Consultation and Engagement

- 4.2.1 Business engagement has been at the heart of the evaluation process and the evaluation for the shared service model has been undertaken alongside operational staff from Adult Social Care. The project also benefits from having full time dedicated staff from the operational teams involved in all areas of the developments, together with representatives from all service areas assessing the business fit of the system.
- 4.2.2 Consultation and engagement with operational staff is one of the key lessons learnt from the previous implementation of the ESCR system, therefore operational staff as 'end users' are at the forefront of these emerging developments. Business Process Re engineering (BPR) resources have also enabled us to capture all our Adult Social Care processes across the assessment and care management pathway and these have formed the basis of the statement of requirements for the replacement system which has been used to assess the business fit of the system for use in Leeds.
- 4.2.3 The roadmap of technology has been developed in consultation with the Leeds Informatics Board which is part of the Leeds Health and Social Care Transformation Programme. This board is taking the lead to develop the joint strategies to deliver joined up health and social care information through the Leeds Care Record.

4.3 Equality and Diversity / Cohesion and Integration

- 4.3.1 In line with the requirement to ensure we give due regard to equality issues in relation to the replacement system proposal, an equality screening tool has been completed. This document sets out the areas that will be 'impacted' by this proposal and the actions which need to be taken to mitigate these impacts (see Appendix 5).
- 4.3.2 The technology components will improve customer experiences and progress services whilst enabling us to measure quality. The technology is the foundation to ensuring that care can be delivered in the most appropriate manner across all client groups maximising the achievement of individually identified outcomes.
- 4.3.3 Adult Social Care provides a route to services that are accessible to all citizens of Leeds with social care needs. There is also a particular emphasis on engagement with service users and their carers to ensure that choice, flexibility and control are delivered through personalised services. This proposal will enhance these processes and facilitate a more person-centred approach.
- 4.3.4 The replacement of the current case management system mainly impacts internally on social work staff and other administrative functions aligned to the assessment and case management processes. The integration of contract monitoring and financial processes

should also ensure that the new system supports our safeguarding responsibilities and reduces risk of harm or exploitation of our most vulnerable service users.

- 4.3.5 Future developments such as the introduction of e-Market Place and the Councils new web site will however have a direct impact on service users. To mitigate this impact we are working to remove the barriers and obstacles that people often experience by providing a universal offer of information, guidance and support for all residents of Leeds. Arrangements have been put in place to ensure these developments include service user consultation.
- 4.3.6 We are working with our Customer Service colleagues and other operational staff teams to develop a more efficient customer relationship. This will improve the customer experience by “getting it right first time”. This will reduce unnecessary referrals and assessments and allow time and resources to be redirected to those who need it most. It will also provide more opportunities for service users to contact us in a variety of ways and share information with us in a more flexible manner.
- 4.3.7 The replacement system and associated developments for customer access to services will therefore impact on a wide spectrum of stakeholders, with implications for finance processes, staffing and resource allocation, job specifications, staff training and business support requirements and ongoing stakeholder engagement and communication strategies.
- 4.3.8 With every proposed change to the current processes and practice, there have been consultation sessions with workers across all levels of the operational teams. This analysis and feedback has been incorporated into the replacement systems project core business plan and any products emerging from the identified requirements have formed the basis of the future replacement system model.
- 4.3.9 As we monitor the progress of these developments we will be able to ensure the actions identified in the EIA screening tool are reviewed and actioned accordingly.

4.4 Council policies and City Priorities

- 4.4.1 The Vision for Leeds 2011-2030 states the ambition for Leeds to become the best city for health and wellbeing by 2030. This programme will support this ambition by ensuring Adult Social Care has effective and efficient information systems and can efficiently and effectively share information with partners to holistically improve customer outcomes. This will reduce duplication in assessment processes and ensure that the right level of customer information is available to those professionals who need it. The customer experience will be improved and practitioners will be better placed to support service users to achieve the outcomes that are important to them, while making limited resources go further.
- 4.4.2 Corporately Leeds City Council has identified a list of the ‘Top 25 Priorities’ to be delivered within the year 2012. The Adult Social Care Directorate has proposed three of these priorities based on our ‘better lives’ theme:
- Better lives through enterprise
 - Better lives through integration
 - Better lives through housing care and support.
- 4.4.3 These priorities aim to reduce inequalities in the health of the citizens of Leeds, address the challenges that are presented by more people living longer and ensure people receive high quality services.

- 4.4.4 Underpinning the priorities is the principle of personalisation; seeing every service user as an individual and supporting them to achieve their personal priority outcomes. Leeds Adult Social Care aims to enable people to exercise greater choice and control over the support they receive. The increased variety of services accessible through individual budgets will require Adult Social Care to be responsive to demands for different types of care and support. The realisation of these priorities and the delivery of quality services is dependant upon the support of high quality and appropriate information systems. This programme will support the capturing of information about how self-funders and direct payment recipients are choosing to meet their needs. This information will provide us with a more accurate picture of the overall care market and enable us to respond to this information and deliver the services that people want, in the way that they want them.
- 4.4.5 If better lives are to be achieved through integration, technology must support new models of service delivery and provide robust information transfer between social care and other partners. This programme will ensure we are in the best possible position to support integrated teams in the future. Improved information sharing will enable professionals to coordinate support and allow service users to access the most appropriate services in their local area, improving access and reducing delays and duplication.
- 4.4.6 This programme will contribute towards the Council's resource priorities to:
- Create the environment for effective partnership working
 - Improve the Information Communication Technology (ICT) infrastructure to support the delivery of priorities
 - Maintain effective arrangements to buy goods and services that give value for money.
 - Maintain effective audit and risk management arrangements
 - Staff are fully involved in delivering change and feel able to make an impact on how services are delivered
- 4.4.7 Improved information management systems will create efficiencies and so release resources to meet the challenges of bringing about large scale business change and reorganisation across health and social care. Improved electronic care records alongside the use of electronic forms will significantly reduce the volume of paper forms and records that need to be retained.

4.5 Resources and value for money

- 4.5.1 Please see exempt Appendix 1 outlining the options appraisal and associated costs.
- 4.5.2 To support the realisation of the aspirations as set out in the White Paper Equity and excellence: Liberating the NHS, the Department of Health has allocated capital grants to local authorities in the UK. It is the intention to fund this programme to implement this first set of components from this capital grant funding.
- 4.5.3 This capital grant funding is accumulated over 2011/12, 2012/13 and included in the council's existing capital provision. The council therefore does not require any further borrowing to fund this investment.

4.6 Legal Implications, Access to Information and Call In

- 4.6.1 The partnership arrangements described in section 3.2 have been developed in consultation with the Head of Property, Finance and Technology and the Procurement Governance and Regulations Manager.
- 4.6.2 The information in exempt Appendix 1 is deemed confidential/exempt under Access to Information Procedure Rule 10.4.3, as it contains information which if disclosed to the public would, or would be likely to prejudice the commercial interests of the Council and/or proposed partner.

4.7 Risk Management

- 4.7.1 This project will not only replace the existing Adult Social Care case management recording solution but also deliver a number of supporting components, such as Reporting, Business Intelligence and EDRMS, and integrate a number of these components together. This means there are a number of dependencies to manage effectively if the project is to deliver successful and timely outcomes.
- 4.7.2 However, this project should not just be viewed purely as a technology project as it will only be a success if the associated business change is effectively managed. It is critical that effective communication, engagement and buy-in is established to effectively embed new technology and garner ownership within Adult Social Care. The project will manage and deliver change as part of its scope.
- 4.7.3 A 'shared service' model is an innovative approach which requires careful diligence and specific arrangements put in place to be successful. This project has the relevant procurement and legal resources working on defining and documenting the partnership and commercial principles and arrangements. This will ensure that Leeds City Council has the relevant assurances and protection in place.
- 4.7.4 All proposed options, and costs, include provision for the relevant number of resources, with the required level of expertise, to deliver the project. In addition effective governance arrangements will be put in place to manage dependencies, risks and budget and ensure the effective delivery of the project.

5 Conclusions

- 5.1 The existing Adult Social Care case management system is now end of life, difficult to develop and will struggle to meet Adult Social Care's short and medium term business requirements. A replacement system will ensure that quality services continue to be delivered to service users.
- 5.2 The future direction of integrated health and social care provision is becoming much clearer. Delivery of health, social care and local working arrangements are evolving and will lead to the delivery of joint services with Health. Significant investment could therefore be made in an Adult Social Care third party case management solution which becomes redundant.
- 5.3 The shared service option is an innovative approach which seeks to retain and maximise the use of resources within the public sector. As outlined in this report the delivery of the benefits and the mitigation of the risks will be closely managed within the project.

6 Recommendations

6.1 The report seeks approval to:

- Enter into a partnership agreement with Calderdale Metropolitan Borough Council for the purchase of an initial 20% share of their Adult Social Care Client Information System (CIS) with options to increase this share as described in section 3.2 of this report
- Authorise expenditure, as defined in exempt Appendix 1 to:
 - § purchase a share in the system and implementation support from Calderdale Metropolitan Borough Council
 - § implement the Case management, integrated financial and contract management modules of Calderdale's CIS in partnership with Calderdale Metropolitan Borough Council to meet Leeds requirements.
 - § implement and integrate Leeds City Council's corporate Electronic Document and Records Management System (EDRMS) in parallel with the Case Management System
 - § build and develop a reporting and Business Intelligence (BI) solution utilising existing corporate reporting and Business Intelligence technology.

7 Background documents¹

7.1 References

Department of Health (DoH) 2010. *Liberating the NHS: An Information Revolution: a consultation on proposals*. The Stationary Office. London.

Department of Health (DoH) 2012. *The Power of Information: Putting all of us in control of the health and care information we need*. The Stationary Office. London.

Leeds 2030: Our vision to be the best city in the UK Vision for Leeds 2011 to 2030 available from: <http://www.leeds.gov.uk/files/Internet2007/2011/46/vision%20document%20final.pdf>

Leeds 2015: Our vision to be the best city in the UK City Priority Plan 2011 to 2015 available from: [http://www.leeds.gov.uk/files/Internet2007/2011/39/citypriorityplanintranet%20raw\(1\).pdf](http://www.leeds.gov.uk/files/Internet2007/2011/39/citypriorityplanintranet%20raw(1).pdf)

Council Business Plan: Our ambition to be the best city council in the UK 2011 to 2015 available from: <http://www.leeds.gov.uk/files/Internet2007/2011/42/council%20business%20plan%20raw.pdf>

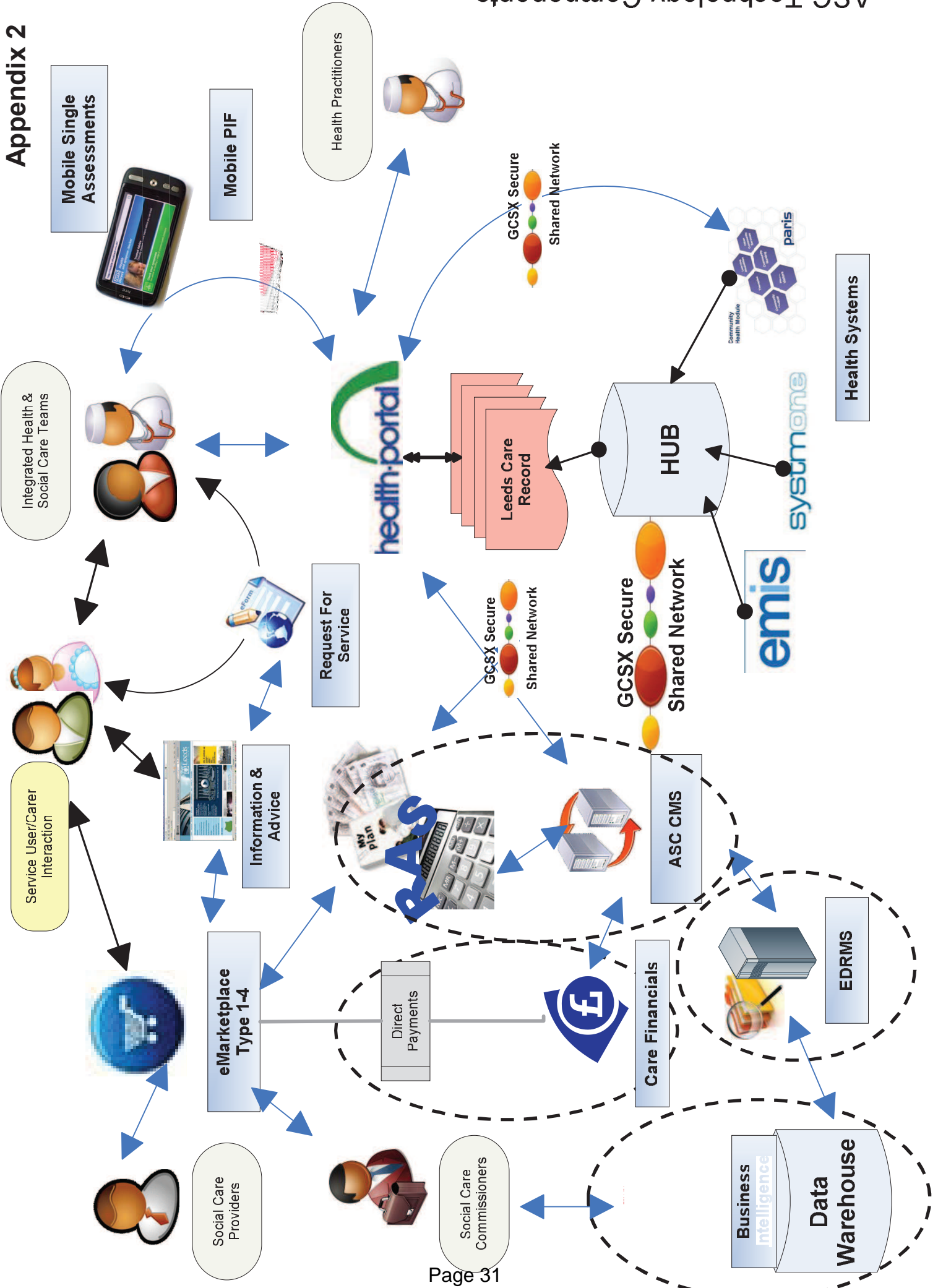
Health and Social Care Act (2012) available from: <http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted/data.htm>

¹ The background documents listed in this section are available for inspection on request for a period of four years following the date of the relevant meeting. Accordingly this list does not include documents containing exempt or confidential information, or any published works. Requests to inspect any background documents should be submitted to the report author.

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Appendix 2



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- 1.1 The costs contained within exempt appendix 1 cover delivery of the following technical components and activities:
- **Case Management including Integrated Financials and Contract Management:** A case management system to support the delivery of effective and efficient assessment and care management processes. All Adult Social Care assessment and case management processes have been reviewed to maximise the benefits of the new system. The new system will include integrated financial recording capability. Capability within the new case management system will provide opportunities for flexible and mobile working. This will enable front line staff to access and update information in multiple locations.
 - **Data Preparation and Migration:** The project will identify all critical data which is required within the replacement case management system and migrate this data from current systems and repositories.
 - **Electronic Document Records Management System (EDRMS):** The implementation of the Councils EDRMS in parallel with the case management system to enable true electronic client records. The project will implement integration between the corporate EDRMS system and the replacement case management system.
 - **Reporting and BI Solution:** An enhanced reporting solution which provides the capability to meet statutory, performance and business intelligence reporting requirements. This also provides an evidence base that enables us to measure the impact of service delivery against customer outcomes.
 - **Financial Management System Integration:** Integration between the Council's Financial Management System and the replacement case management system to support seamless financial management.
 - **Children's Social Work Service Case Management Integration:** Integration with the newly procured Children's Social Work Service case management system to effectively manage transitions between Children's Social Work Service and Adult Social Care services.
 - **Corporate Gazetteer Integration:** Integration with the Corporate Gazetteer system to provide regular 'feeds' of address information into the replacement case management solution.

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Benefit Description

Full electronic management of end to end Adult Social Care processes.

Adult Social Care will be provided with a system that:

- ▼ **Provides the ability to electronically manage all aspects of Adult Social Care.**
 This is currently not possible within the existing system *e.g. full end to end electronic management of the care planning function is not possible through the existing system.*

Benefit: Improved Business Intelligence across Adult Social Care

Benefit: Improved ability to model Business Models an actual processes and data

- ▼ **Single version of service critical data:** Electronic management will subsequently ensure Adult Social Care are provided with a single version of its service critical data. At present Adult Social Care are exposed to the risk that critical data is duplicated or differs, between manual paper records and the current electronic system.

Benefit: Customer can receive copies of documents i.e. assessment and support plan which is up to date and fully costed.

- ▼ **Removal of inconsistent and duplicate recording practices:** Providing a single source of data removes the current practice of storing sensitive Adult Social Care critical data outside an electronic case management system. This will:

 - I. Ensure all parts of Adult Social Care have access to one record at any given time to allow resource led and case related decisions to be made.
 - II. Provide increased confidence that all relevant information is taken into account.
 - III. Specifically support real time decision making across all levels of Adult Social Care and allow for transparency within that process. .

Benefit: Enables all key people involved in the care planning process with service users to share and update information in one place via the ‘support plan’. This includes things like emergency contacts and contingency plans in the event of a crisis.

Benefit: Enables accurate and up to date information sharing on service availability, bed occupancy, vacancies etc to be shared with all key people that need to access

this information

- ∇ **Data Quality & Integrity:** Certain key data will require input only once due to automatic replication across all forms. This will ensure that data input errors are minimised and that the information becomes accessible in a timely manner.

Benefit: Increased staff confidence in data quality

Benefit: Increased confidence in the reliability of reported data

End to end social care processes managed effectively and to best practice.

- ∇ Electronic management provides the ability to ensure all processes are managed effectively and to best practice.

- I. **Effective Management:** Availability of electronic forms supporting end to end processes throughout Adult Social Care. *A full suite of such forms is not currently available within the existing system.*

- II. Effective management will ultimately ensure **unnecessary delays in performing critical safeguarding activity are limited / removed.**

- III. Effective management will also support Adult Social Care in implementing **early and effective intervention procedures.**

- § All information relating to any referral will be assessable through the electronic file. This will provide the Adult Social Care with an increased ability to provide critical information to the correct agency at the right time.

- ∇ **Best Practice:** Electronic forms will support **consistent processes being embedded within the service** enabling Adult Social Care to improve best practice standards.

- I. A single version of all critical and essential forms will be utilised across the service.

- II. National formats and guidance on all related forms will be built into the system,

End to end social care processes managed via an Intuitive and User Friendly system.

∇ **Intuitive System:**

Adult Social Care practitioners will benefit from the use of an intuitive system that:

- I. Supports and guides the practitioner in completing required activity to best practice standards.
- II. Simplifies the recording of data and strengthens compliance through consistent and validated processes.

∇ **User Friendly System:** Social Workers will not have to spend any more time on the system than is necessary when inputting retrieving and interrogating data.

Benefit: 10% efficiency increase in performing Social Care Specific Activity

As a result of implementing an effective electronic case management system in conjunction with other components should realise a 10% increase in the time not spent updating and navigating an inefficient system. The 10% efficiency increase will allow:

- I. Increased capacity to assist in managing increasing demand,
- II. Improved quality of decision making and outcomes,
- III. Increased flexibility

Collaborative approach towards provision of Health and Social Care:

Improved information sharing capability that provides the following benefits:

- ∇ Better and more appropriate management of information
- ∇ More secure and timely exchange of relevant and appropriate information
- ∇ Ability to manage the sharing of information by consent where appropriate
- ∇ Promotes role based access to information, reduces the risk of access to whole system.
- ∇ Supports pseudonymisation - reduces risk of sharing client level information with staff who don't need it
- ∇ A framework which supports the earlier capture, and better understanding of, emerging business change requirements across Health and Adult Social Care

Consistent Business Processes: The delivered system will support Adult Social Care in the implementation of consistent business process and ensure

that such processes promote improved service quality across the directorate. The benefits brought by the standardisation of business processes could realistically be estimated to save 20 minutes a day per staff member.

Benefits: Key Benefits of Consistent, Standardised Business Processes would include:

- ∇ Clearer, consistent processes lead to reduced risk in the management of change.
- ∇ The Provision of an uncomplicated means to track case progress.
- ∇ The Facilitation of the development and delivery of training for social workers, using best practice principles.
- ∇ The Reduction of the time required to train existing staff and,
- ∇ The Reduction of induction time, for Agency Staff/New starters.

Workflow & Alerting: The processes will be workflow driven allowing for the implementation of alerts when tasks and activity should be activated, ensuring that no tasks are forgotten amidst a very busy case load.

Clear Audit Trail:

The ability to electronically manage end to end Social Care processes will allow Adult Social Care to generate a full audit trail of all client activities.

Benefit: Increased consistency in the gathering and usage of information

Integration between Case Management and finance systems:

Best practice guidance indicates integrating social care activity with financial record management to enable the departments to stay on budget and track financial commitments associated with social care work. This integration will streamline the budgeting process and increase financial control and supply a full financial audit trail.

- ∇ Full integration will be delivered between the Case management system and the financial system. *Such integration is not currently available between existing systems.*
- ∇ Effective management of processes, in conjunction with integration between case management and Adult Social Care finance systems, will provide Adult Social Care finance resources with the following key Benefits:
 - ∇
 - I. The ability to **manage and control social care budgets efficiently.**

- II. The ability to **significantly improve existing financial management, budgeting and forecasting processes**. *At present these activities are performed manually between a number of resources across Adult Social Care .*
- III. *Other financial management benefits re. time savings for finance teams*

Data Integrity and Reliability:

Implementing improved social care systems will support Adult Social Care in increasing the reliability of the data stored within the system. Due to a higher level of data integrity and data availability, business intelligence and performance management across all levels within Children’s Services will be improved.

This includes the following Benefits:

- ∇ Front line Team managers having reliable and sufficient information to support city wide and area performance requirements, manage their team’s caseloads and individual Social Work performance.
- ∇ Senior managers and the Directorate able to analyse performance across teams, activity areas and the business as a whole.
- ∇ Automated reporting of spend and forecast across client groups, teams and providers.
- ∇ Increased reliable management information provides Team Managers, SDMs and Heads of Service with the ability to make informed decisions regarding service delivery.

Reduced Administration Time

- ∇ Time will be saved by administration staff locating, printing, delivering, collecting, consolidating and filing client information. Administration staff will be able to focus additional effort in supporting social workers. An effective case management system will incorporate auto-generation of letters and review consultation resulting in administration staff being able to provided increased administration support to social workers e.g. completing information checks requested by Social Workers and managing social worker diary commitments,
- ∇ The retrieval of key information and documentation will be quicker and more efficient: this will support administration staff and Social Care professionals in

more flexible and mobile access to key data and forms.

A reduction in the storage of paper:

- ∇ A reduction in paper costs is anticipated as information becomes increasingly available electronically.

Improved compliance against future changes to national Social Care legislation and best practice:

- ∇ **Reduce the risk to LCC** in having to develop a system by themselves in response to ever changing social care national requirements.
 - I. As detailed, the existing ESCR system has evolved overtime. This has resulted in the system becoming difficult to amend without significant time, effort and cost incurred by teams across ICT, ESCR Support and Adult Social Care.
- ∇ Implement and operate systems that are **cost effective and sustainable** to current and future Social Care legislation requirements.
- ∇ Provide Children's Services with the **flexibility to maintain compliance** against changing national and local agendas.

Faster and More Responsive Service:

- ∇ Offline mobile access: the system and all key forms/templates to support the front-line case management function can be accessed offline and information entered. This information is saved and is then automatically uploaded into the system upon the practitioner logging back into the online system.

Benefit: In this instance information only requires to be input once, additional time and worker effort is not required to re-enter assessments etc. Given the anecdotal evidence, from Social Care staff, around time taken to complete the SDAQ, this reduction in double-inputting of data might be expected to save a Social Worker 60 minutes per day.

Flexible Working: Social work staff will be provided with:

- ∇ The ability to work from home and hot desk, reducing the need for office space, increasing social worker productivity, reduce social worker travel and associated

carbon footprint.

- ∇ Flexibility in performing necessary activity with service users leading to increased positive outcomes.
- ∇ Gain access to service critical information to inform decision making.
- ∇ Reduced social worker administration tasks.
- ∇ Improvement in data collection leading to an increase in data quality.

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Equality, Diversity, Cohesion and Integration Screening

As a public authority we need to ensure that all our strategies, policies, service and functions, both current and proposed have given proper consideration to equality, diversity, cohesion and integration.

A **screening** process can help judge relevance and provides a record of both the **process** and **decision**. Screening should be a short, sharp exercise that determines relevance for all new and revised strategies, policies, services and functions. Completed at the earliest opportunity it will help to determine:

- the relevance of proposals and decisions to equality, diversity, cohesion and integration.
- whether or not equality, diversity, cohesion and integration is being/has already been considered, and
- whether or not it is necessary to carry out an impact assessment.

Directorate: Adult Social Care	Service area: Adults
Lead person: Nyoka Fothergill	Contact number:

1. Title: Adult Social Care Systems Review Project
Is this a:
<input type="checkbox"/> <u>Strategy / Policy</u> <input type="checkbox"/> Service / Function <input checked="" type="checkbox"/> Other
If other, please specify – Replacement of Adult Social Care Case Management System

2. Please provide a brief description of what you are screening
<p>This screening tool will look at the relevance of ‘Equality’ in regards to the implementation of a new Adult Social Care Case Management System. This will be delivered through the Adult Social Care Systems Review Project.</p> <p>There are numerous activities involved with the implementation of a new case management system and these are set out below to demonstrate the scope of the Adult Social Care Systems Review project:</p> <ol style="list-style-type: none"> 1. The scoping of business requirements, planning and implementation of changes to the Adult Social Care Case Management System. 2. The systematic improvement of the quality of Adult Social Care client data, as held in

the current

case management system in preparation for 'data migration' to the new system.

3. The improvement of the speed and usability of the case management interface.
4. The development and promotion of 'off line' usage in a wider variety of locations – in support of the 'Changing The Workplace' principles.
5. The facilitation of improved reporting capabilities across Adult Social Care.
6. The reduction of duplication of recording, with regard to data input tasks.
7. The facilitation and development of 'sharing information' solutions with other stakeholders in the health and social care sector.

The activity outlined above is only one element of Adult Social Care business change activity that is contributing to the 'Transformation of Adult Social Care Services' agenda which has a direct impact on service users and staffing groups across Leeds.

However, the replacement of the current case management system mainly impacts internally on social work staff and other administrative functions aligned to the assessment and case management processes. The impact on service users is external and they should experience a 'direct benefit' from the implementation of a new case management system. The vision for the new system is to have a better service user interface whilst providing more up to date and timely information following the assessment/review process.

The project will therefore impact on a wide spectrum of stakeholders, with implications for finance processes, staffing and resource allocation, job specifications, staff training and business support requirements and ongoing stakeholder engagement and communication strategies.

3. Relevance to equality, diversity, cohesion and integration

All the council's strategies/policies, services/functions affect service users, employees or the wider community – city wide or more local. These will also have a greater/lesser relevance to equality, diversity, cohesion and integration.

The following questions will help you to identify how relevant your proposals are.

When considering these questions think about age, carers, disability, gender reassignment, race, religion or belief, sex, sexual orientation and any other relevant characteristics (for example socio-economic status, social class, income, unemployment, residential location or family background and education or skills levels).

Questions	Yes	No
Is there an existing or likely differential impact for the different equality characteristics?	x	
Have there been or likely to be any public concerns about the policy or proposal?	x	
Could the proposal affect how our services, commissioning or procurement activities are organised, provided, located and by	x	

whom?		
Could the proposal affect our workforce or employment practices?	x	
Does the proposal involve or will it have an impact on <ul style="list-style-type: none"> • Eliminating unlawful discrimination, victimisation and harassment • Advancing equality of opportunity • Fostering good relations 	x	

If you have answered **no** to the questions above please complete **sections 6 and 7**

If you have answered **yes** to any of the above and;

- Believe you have already considered the impact on equality, diversity, cohesion and integration within your proposal please go to **section 4**.
- Are not already considering the impact on equality, diversity, cohesion and integration within your proposal please go to **section 5**.

4. Considering the impact on equality, diversity, cohesion and integration

If you can demonstrate you have considered how your proposals impact on equality, diversity, cohesion and integration you have carried out an impact assessment.

Please provide specific details for all three areas below (use the prompts for guidance).

- **How have you considered equality, diversity, cohesion and integration?**

(think about the scope of the proposal, who is likely to be affected, equality related information, gaps in information and plans to address, consultation and engagement activities (taken place or planned) with those likely to be affected)

It is difficult for a replacement case management system proposal to be viewed as a priority in the current economic climate. However it is important to recognise that these 'technology components' form the basis of a technical infrastructure that supports us to improve care outcomes and improve services whilst enabling us to measure quality. The vision of the new system is to have a better user interface whilst providing more up to date and timely information following the assessment/review process.

The projects role is to engage all areas of the Adult Social Care service through workshops, scoping requirement meetings and feedback events. In addition to these activities there is an ongoing Business Systems Transformation (BST) team capturing the 'end-to-end' assessment and case management process and analysis of operational practices.

This work has provided Adult Social Care with business intelligence and a gap analysis which has enabled the team to formulate a tactical 'to be' process that is more streamlined and fit for operational purpose. This 'to be' process has formed the baseline for the development of the replacement systems statement of requirements (SOR) which is a vital requirement for linking people to process and technology.

With every proposed change to the current processes and practice, there have been

consultation sessions with workers across all levels of the operational teams. This analysis and feedback has been incorporated into the replacement systems project core business plan and any products emerging from the identified requirements have formed the basis of the future replacement system model.

The 'to be' process that is currently being proposed is a 'tactical change' due to the emerging requirements for health and social care integration. At this stage the focus is on 'sharing information' with partners as opposed to shared systems as this meets the current positions of both health and social care system requirements in the interim period.

Consultation with key stakeholders: -

DIRECTORATE SENIOR MANAGEMENT TEAM – lead officer process owners
SERVICE DELIVERY MANAGERS – lead operational process owners
TEAM MANAGERS – via involvement in workshops
FINANCE – via involvement in workshops
COMMISSIONING AND CONTRACTS –via involvement in workshops
SAFEGUARDING UNIT - via involvement in workshops
AREA SOCIAL WORK TEAMS - involvement in workshops
PERFORMANCE AND REPORTING - involvement in workshops
ORGANISATIONAL DEVELOPMENT - involvement in workshops
HOSPITAL SOCIAL WORK TEAMS - involvement in workshops
JOINT CARE MANAGEMENT TEAMS - involvement in workshops
SPECIALIST SOCIAL WORK TEAMS - involvement in workshops
LEARNING DISABILITIES - involvement in workshops
MENTAL HEALTH - involvement in workshops
BUSINESS SUPPORT - involvement in workshops, involvement in 'Super User' consultations and advance training sessions, user acceptance testing and modelling exercises

The Directorate Senior Management Team are responsible and accountable for their respective processes in the Statement of Requirements (SOR) for the replacement system. This enables robust change controls to be put in place as well as operational ownership for the replacement system developments in partnership with the project team.

This area of accountability is integral to the projects success to ensure each service area/process that is developed is in line with the 'end user' requirements and supports service delivery.

• Key findings

(think about any potential positive and negative impact on different equality characteristics, potential to promote strong and positive relationships between groups, potential to bring groups/communities into increased contact with each other, perception that the proposal could benefit one group at the expense of another)

The main impact of a replacement case management system is on the 'end users' of the system so in this respect this will have a direct impact on social workers and other staffing groups as 'users' of the system. The integration of contract monitoring and

financial processes should also ensure that the new system supports our safeguarding responsibilities and reduces risk of harm or exploitation of our most vulnerable service users.

The business intelligence gathered about the impact on 'end users' identifies that there are currently 1200 users of the current system, with a maximum concurrency of 650 users at any given time. Of this quota 94 users have a degree of visual/learning 'impairment' resulting in additional software requirements that need to integrate with any future system to meet these individual needs. The usage can be expected to increase, with the introduction of a more streamlined and fit for purpose case management system.

There is also a specific impact on 'business support' processes which will require the revision of job specifications and roles and responsibilities. Some activity has already been undertaken across the area social work teams where job descriptions and roles have already been aligned to support the business needs. However, further work is required to understand the business support needs for the development of the finance and contracts modules in the replacement system.

Future developments such as the introduction of E Market Place and the Councils new web site will however have a direct impact on service users. To mitigate this impact we are working to remove the barriers and obstacles that people often experience by providing a universal offer of information, guidance and support for all residents of Leeds. Arrangements have been put in place to ensure these developments include service user consultation.

We are working with our Customer Service colleagues and other operational staff teams to develop a more efficient customer relationship. This will improve the customer experience by "getting it right first time". This will reduce unnecessary referrals and assessments and allow time and resources to be redirected to those who need it most. It will also provide more opportunities for service users to contact us in a variety of ways and share information with us in a more flexible way

- **Actions**

(think about how you will promote positive impact and remove/ reduce negative impact)

1. Review individual needs of all the end users on the 'impairment' list to ensure continued software compatibility with the replacement system. Without this action being undertaken there can not be any assurance that these end users will not be disadvantaged or able to utilise the new functionality that will enhance their flexibility and support future practice.
2. Undertake further analysis of 'business support' requirements across finance and contracting processes to ensure roles and responsibilities are aligned and a 'whole systems' approach is applied to all end users.
3. Need to undertake further analysis of document formats. We may have a requirement to develop key documents such as assessment/review forms in different formats such as Braille or another language if requested by service users. This requirement will need to be added to the statement of requirements for form developments to ensure the developments include this action.
4. Undertake benefits analysis following implementation of the new system to ensure the products are meeting staff and service user needs.
5. Need to undertake service user consultation as part of E Market and WIRP

developments to ensure that service users views are considered and the information on these sites is meeting their individual needs

5. If you are **not already considering the impact on equality, diversity, cohesion and integration you **will need to carry out an impact assessment**.**

Date to scope and plan your impact assessment:	n/a see above section 4
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Date to complete your impact assessment	
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Lead person for your impact assessment (Include name and job title)	
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6. Governance, ownership and approval

Please state here who has approved the actions and outcomes of the screening

Name	Job title	Date
Nyoka Fothergill	Head of Business Change	4 th June 2012

7. Publishing

This screening document will act as evidence that due regard to equality and diversity has been given. If you are not carrying out an independent impact assessment the screening document will need to be published.

Please send a copy to the Equality Team for publishing

Date screening completed	04.06.2012
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Date sent to Equality Team	
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Date published (To be completed by the Equality Team)	
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**EXTRACT FROM DRAFT MINUTES OF EXECUTIVE BOARD
MEETING HELD ON**

WEDNESDAY, 18TH JULY, 2012

PRESENT: Councillor K Wakefield in the Chair

Councillors J Blake, A Carter, M Dobson,
S Golton, P Gruen, R Lewis, L Mulherin,
A Ogilvie and L Yeadon

ADULT SOCIAL CARE

45 Shared Service Partnership with Calderdale Metropolitan Borough Council to meet Adult Social Care Technology Requirements

The Director of Adult Social Services submitted a report outlining the options available for replacing the current Electronic Social Care Record (ESCR) and ESCR financial systems, whilst also detailing the case for adopting a shared service partnership arrangement with another local authority. In addition, the report outlined the supporting technology components, including Electronic Document Record Management and Reporting, to be implemented alongside the case management solution. The report also sought approval to enter into a partnership agreement with Calderdale Council, release the related funding and incur the necessary expenditure.

The report noted that a number of options for the replacement of the existing ESCR and ESCR financial systems had been investigated. The options considered related to:

- Upgrading the existing system;
- The use of health systems;
- The procurement of a third party system; and
- A potential 'shared service' arrangement with another local authority, where Leeds adopted their case management recording system.

Responding to specific concerns raised as to whether the Adult Social Care Client Information System used by Calderdale Council would be fit for Leeds' purpose, it was requested that related matters were referred to the Corporate Governance and Audit Committee, so that the acquisition of the system could be monitored.

Following a Member's enquiry regarding the costs associated with this scheme, together with the equivalent system used by Children's Services, the Member in question was provided with further details, with officers undertaking to provide more detailed information, should this be required.

Having noted the comments which had been made, it was agreed that further to the related matters being referred to the Corporate Governance and Audit Committee, Executive Board receive an update report every 6 months in order to monitor the progress of the initiative.

Following consideration of Appendix 1 to the submitted report, designated as exempt under Access to Information Procedure Rule 10.4(3), which was considered in private at the conclusion of the meeting, it was

RESOLVED –

- (a) That approval be given to enter into a partnership agreement with Calderdale Metropolitan Borough Council for the purchase of an initial 20% share of their Adult Social Care Client Information System (CIS), with options to increase this share as described in section 3.2 of the submitted report.
- (b) That the necessary expenditure be authorised, as defined within exempt Appendix 1 to the submitted report, to undertake the following:-
- purchase a share in the system and implementation support from Calderdale Metropolitan Borough Council;
 - implement the Case management, integrated financial and contract management modules of Calderdale's CIS in partnership with Calderdale Metropolitan Borough Council to meets Leeds requirements;
 - implement and integrate Leeds City Council's corporate Electronic Document and Records Management System (EDRMS) in parallel with the Case Management System;
 - build and develop a reporting and Business Intelligence (BI) solution utilising existing corporate reporting and Business Intelligence technology.
- (c) That the matters raised in relation to the Adult Social Care Client Information System be referred to the Corporate Governance and Audit Committee, so that the acquisition of the system can be monitored.
- (d) That Executive Board receive a report every 6 months which provides an update in respect of the project's progress.